



63334 Lohmann Lane  
Eastman, WI 54626  
Phone: 608-874-4044 1-888-97-ALERT  
Website: [www.latexallergyresources.org](http://www.latexallergyresources.org)

February 28, 2015

THE TWENTY-EIGHTH LEGISLATURE  
REGULAR SESSION OF 2015

COMMITTEE ON WAYS AND MEANS

Senator Jill N. Tokuda, Chair  
Senator Ronald D. Kouchi, Vice Chair

**Support for SB 911 - Relating to Latex**

We are writing in support of SB911 – “RELATING TO LATEX. Prohibits the use of latex gloves in dental health facilities, health care facilities, by personnel providing ambulance services or emergency medical services pursuant to the state comprehensive emergency medical services system, and in food establishments.”

Latex allergy is a serious concern because it causes reactions ranging from mild rashes to difficulty breathing to deadly anaphylaxis. The allergy progresses with each exposure, and there is currently no medically approved treatment except strict avoidance. Approximately three million people in the general population of the United States have this allergy, and incidence is even higher in certain at-risk populations, such as children with spina bifida (up to 68%), health care workers (up to 17%), and anyone who has a history of other allergies, frequent surgeries, or frequent exposure to natural rubber latex gloves - including food service workers.

Research has shown that the latex proteins that cause allergic reactions can be transferred from natural rubber latex gloves to food. Latex-allergic individuals must be hyper vigilant about latex exposure, and need to be aware if the food they're eating in a restaurant might be a source of a potential allergic reaction. Passing this legislation will protect Hawaii residents and the millions of tourists who visit each year. This bill may also protect food service workers from occupational health risk.

For more information on latex allergy you can contact ALAA at [alert@latexallergyresources.org](mailto:alert@latexallergyresources.org) or visit our website [www.latexallergyresources.org](http://www.latexallergyresources.org)

Thank you in advance for your support of SB911.

Sincerely,

Sue Lockwood, CST  
Executive Director

Marsha S. Smith, RDH, BSDH  
President

Hawaii State Legislature  
State Senate  
Committee on Ways and Means

State Senator Jill N. Tokuda, Chair  
State Senator Ronald D. Kouchi, Vice Chair  
Committee on Ways and Means

Tuesday, March 3, 2015, 9:05 a.m. Room 211  
Senate Bill 911 SD1 Relating to Latex

Honorable Chair Jill N. Tokuda, Vice Chair Ronald D. Kouchi, and members of the Senate Committee on Ways and Means,

My name is Russel Yamashita and I am the legislative representative for the Hawaii Dental Association and its 960 member dentists. I appreciate the opportunity to testify in opposition of Senate Bill 911 SD1 Relating to Latex. The HDA believes that as well intentioned as this legislation is, it is overly broad and simplistic in its belief that the total prohibition of latex gloves will eliminate problems for those who are sensitive to latex.

As written, this bill would prohibit the use of any latex gloves products in the dental office, ambulance services and food service. The proponents of this legislation have testified in prior hearings that the “dust” from latex gloves caused problems for those who are sensitive to latex. If that is the case, then where does the prohibition of the use of latex products end? Latex is used in many products which are used on a daily basis, from bandaids, rubber bands, erasers, balloons, and diaphragms. In the practice of dentistry, latex components are use in dental dams, orthodontic elastics, gutta perch and a number of other devices. Are the proponents of this legislation going to ask that any product containing latex is to be banned as well?

Currently, all dentists ask their patients for their medical histories to determine if they have any allergies or sensitivity to drugs or latex. In those cases where a sensitivity to latex is indicated, the dentist and his or her staff will use the non-latex nitrile gloves while treating those patients. In such situations, the dental profession has always taken the patient’s interest first and has done so for many years since becoming aware of latex sensitivity. Therefore, the HDA believes that the total ban of the use of latex gloves is not warranted at this time and this legislation be held by this committee.

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [NHay728201@aol.com](mailto:NHay728201@aol.com)  
**Subject:** Submitted testimony for SB911 on Mar 3, 2015 09:05AM  
**Date:** Monday, March 02, 2015 4:45:25 AM

---

**SB911**

Submitted on: 3/2/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Nickey Haywood	Individual	Comments Only	No

Comments: Hello and thank you for taking the time to read my comments. I live in Colorado and am the mother of 7 children, including a 6 year old daughter who has latex allergy. We began suspecting this allergy when she was 4 months old and reacted to latex product on my husbands work clothes. She broke out in a rash nearly every time he came home from work if he did not change clothes and shower prior to holding her. When she was 18 months old we had blood testing done that verified her latex allergy. At that time we were told that it was a mild allergy that she might grow out of. We now know that this is probably not true and that, if she continues to be exposed to latex, her allergy to it may increase in severity over time, possibly leading to anaphylaxis in the future. Due to lack of labeling laws on various products containing latex, it is very difficult to know when she may be exposed. We must be constantly on the lookout for possible sources. Even the local playgrounds are often off limits to her because they use recycled tires, sometimes containing natural rubber latex, and have caused reactions for her in the past. With so many possible sources of latex in the wider community, families shouldn't have to worry about their child coming into contact with it in a medical facility, those places where they should feel safest receiving care. I would ask that you would please take that into consideration as you debate this bill and move toward making your beautiful state a safer place for all children (and adults) who have latex allergy. Thank you again for your time.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)

From: [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
To: [WAM Testimony](#)  
Cc: [xxshyre04@gmail.com](mailto:xxshyre04@gmail.com)  
Subject: Submitted testimony for SB911 on Mar 3, 2015 09:05AM  
Date: Sunday, March 01, 2015 7:09:41 PM

---

## **SB911**

Submitted on: 3/1/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Shyre Haas-Laczko	Individual	Support	No

Comments: Senator Josh Green, Chair Senator Glenn Wakai, Vice Chair Committee on Health Senator Rosalyn H. Baker, Chair Senator Brian T. Taniguchi, Vice Chair Committee on Commerce and Consumer Re:Protection Support for SB 911 - Relating to Latex Dear Senators, I am a mother of a 16 year old girl, who was recently diagnosed with a latex allergy. She wore latex gloves in a community cleanup for an hour. She had a severe reaction to it and was on steroids and her face had angioedema and her hands had a rash for seven days. She had another incident where a woman wore latex gloves and handled food at a debate tournament. Again, she had a reaction. She is very sensitive to latex. I called her dentist and told them about her allergy and they said to just tell the dentist about it, so he can wear a different glove. This is unacceptable because his office uses latex gloves and the powder is everywhere. They are not educated on this severe allergy. Please support SB 911, so health care providers can be protected and those with latex allergy will be safe in the health related facilities. It is very hard to find a dentist that has a latex free office. I know you're in Hawaii; however, I believe as more and more states make legislation in this area, the world will be a safe place for my daughter. The knowledge that she is so young, and knowing repeated exposure makes her more at risk to develop anaphylaxis, is very painful for me. I don't want my daughter to feel unsafe and at risk for harm when she goes to the doctors. They are supposed to be a safe place for her to go. Hawaii Senate Bill 911 is very important. Removing latex glove use in medical/dental/health facilities, emergency response and transport vehicles, and all food entities will help to remove a substantial risk to a person with latex allergy. It will also remove the risk of employees being exposed to the over use of latex which increases their risk of developing a latex allergy. I implore you to support SB 911. Thank you! Shyre Haas-Laczko 8176 Casey Court Elkridge, MD 2107 410-796-1234

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)



**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [msdavis81@gmail.com](mailto:msdavis81@gmail.com)  
**Subject:** Submitted testimony for SB911 on Mar 3, 2015 09:05AM  
**Date:** Sunday, March 01, 2015 10:08:48 AM

---

**SB911**

Submitted on: 3/1/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Melissa Davis	Individual	Support	No

Comments: Latex allergy has ruined my life. I must call ahead before going into any public establishment or risk dying from an accidental latex exposure. Health care facilities should be a safe haven for those suffering with latex allergy, but often they are more deadly due to latex glove usage and by allowing balloons in their facilities. I struggle to live each and every single day. I fully support this, and hope it will prevent unnecessary exposure to future generations.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [mjo57lbe@mac.com](mailto:mjo57lbe@mac.com)  
**Subject:** \*Submitted testimony for SB911 on Mar 3, 2015 09:05AM\*  
**Date:** Saturday, February 28, 2015 2:27:31 PM

---

**SB911**

Submitted on: 2/28/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Michael	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [lehiwadesigns@gmail.com](mailto:lehiwadesigns@gmail.com)  
**Subject:** \*Submitted testimony for SB911 on Mar 3, 2015 09:05AM\*  
**Date:** Saturday, February 28, 2015 1:53:38 PM

---

**SB911**

Submitted on: 2/28/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
therese owens yap	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)



**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [cokuda@hawaii.edu](mailto:cokuda@hawaii.edu)  
**Subject:** \*Submitted testimony for SB911 on Mar 3, 2015 09:05AM\*  
**Date:** Saturday, February 28, 2015 4:14:55 AM

---

**SB911**

Submitted on: 2/28/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
cokuda	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [uscmom777@yahoo.com](mailto:uscmom777@yahoo.com)  
**Subject:** \*Submitted testimony for SB911 on Mar 3, 2015 09:05AM\*  
**Date:** Saturday, February 28, 2015 12:23:56 AM

---

**SB911**

Submitted on: 2/28/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Julia Souza	Individual	Support	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)

Hawaii Committee on Ways and Means  
Senator Jill N. Tokuda, Chair  
Senator Ronald D. Kouchi, Vice Chair  
Testimony of Anna M. Salanti on SB911, SD1  
March 3, 2015

Thank you Senator Tokuda and Senator Kouchi for allowing me to submit testimony on SB911, SD1. My name is Ana Salanti, RN, CCM. I appreciate the opportunity to present testimony in support of SB911, SD1.

I have struggled with the difficulties of living with a latex allergy since 1974 when I first developed contact dermatitis, type IV (delayed) hypersensitivity, from wearing latex gloves while working in a research burn center. By 1993, the allergy progressed to type I (immediate) hypersensitivity, anaphylactic response. When I come into contact with even a very small amount of latex protein, within 20 minutes I will develop facial swelling, itchy, watery eyes, throat swelling, wheezing and difficulty breathing that requires the self-administration of epinephrine and follow-up emergency care.

SB911, SD1 prohibits the use of latex gloves in dental health facilities, health care facilities, by personnel providing ambulance services or emergency medical services pursuant to the state comprehensive emergency medical services system, and in food establishments. If this bill becomes law, it will be the most comprehensive ban on latex in the United States.

Warnings about the dangers of latex in the workplace have been available to us for **SEVENTEEN** years since July 23, 1997 (NIOSH, 1997). That was when the United States Health Department through the Centers of Disease Control and the NIOSH Alert on work related latex allergy. The publication states that latex allergy results from repeated exposures to natural rubber latex proteins from inhalation and/or skin contact.

By the mid 1980's latex was recognized as a major occupational hazard for health care workers and patients (Holter, G., et. al, 2002). This was **THIRTY** years ago. **NINETEEN** years ago in 1996 The American College of Allergy, Asthma, and Immunology recommended the complete avoidance of latex materials in medical institutions (Sussman & Gold, 1996).

During the past 10-15 years, the incidence of latex allergies has risen dramatically (Neugut, Ghatak, and Miller, 2001). This continued sensitization to latex has

resulted in the following well documented statistics. The percentages in these subgroups can be as high as:

- 67% in patients with spina bifida (Kurup, Reijula, & Fink, 1994)
- 17% of health care workers (Phillips, Goodrich, & Sullivan, 1999)
- 10% of food service workers (Ameratung, et. al, 2008)
- 8.2% of the general population (19 million US citizens) (Grzybowski, 2002)
- 6.5% of patients who have undergone multiple surgeries (Sussman & Gold, 1996)
- 11% of elderly population (Grieco, et. al, 2014)
- 10% of rubber industry workers (Pien, 2010)
- 10 deaths each year are due to severe reactions to latex allergy (Asthma, 2001)

How many more people have become sensitized to latex in the past 17 years since the United States Department of Health issued its latex warnings? Too many individuals are now suffering a lifetime sentence of latex allergy due to the lack of oversight by the very agencies that are in place to protect human life by not banning latex gloves in health care settings and food service. The time has come for us to be responsible and ban latex gloves in these settings.

Latex allergy is an incurable, progressive disease. With each exposure to natural rubber latex the sensitivity and progression of the disease worsens. Starting as a localized rash, it develops into sensitivity so severe that a particle small enough to attach to a speck of dust can cause a life threatening anaphylaxis if inhaled from airborne latex during a health care exam, surgical procedure, or ingested in contaminated food. **Latex allergy is a preventable 100% of the time with a 0% cure rate all of the time.**

When you acquire the allergy it is for a lifetime and changes how you live your life. Some examples of latex exposures and how it has affected my life include:

- My first anaphylactic reaction occurred as a consequence of eating food that had been handled with latex gloves at a restaurant. After self-injecting epinephrine, 911 was called for transport to the emergency room of the local hospital. However, when the ambulance arrived, the attendants determined that it would not be safe for me to ride in the ambulance due to latex use. Consequently, I took a cab to the emergency room.
- My allergy impacts my ability to obtain health care services. I obtain only the absolutely minimum necessary care and limit medical procedures and appointments.

- I travel a long distance to receive latex-safe dental care. If oral surgery is required, I must seek out a surgeon who does not use latex products or gloves in his/her office.
- Both my allergist and my primary care physician have met me in their respective parking lots for medical appointments. Although they do not use latex gloves, other practitioners in their medical buildings do. The latex particles are distributed via the heating/ventilation system resulting in a latex allergic reaction for me.
- I experienced six exposures to latex in my workplace, after each of which I experienced an anaphylactic reaction. With each exposure my sensitivity increased, and I was forced to resign from a nursing career which I loved.

Latex allergy is a serious health hazard and has been very well documented in the health care industry. In the literature, there are well-documented cases of food service handlers becoming sensitized to latex gloves as well as latex allergic consumers having life threatening reactions from eating foods contaminated with latex proteins by food handlers using latex gloves. Low protein, non-powdered latex gloves are not a solution but a contributing factor to increased latex sensitization.

It is possible to switch from latex to non-latex food service without great difficulty or delay. In June 2001, legislation banning latex gloves in food service passed both houses of the Rhode Island legislature with the ban becoming effective on July 13, 2001. The health departments in Arizona and Oregon issued regulations banning latex gloves in food service on April 23, 2001 and November 2003, respectively. The bans in those two states became effective six months later: for Arizona October 3, 2001, for Oregon, March 2003. The penalty for not abiding by this ban is \$500 in Rhode Island and Oregon. The Oregon ban protects 113,000 restaurant employees and even more customers from latex exposure each year (DHS, 2005). Since the ban on latex gloves in food service establishments, latex allergy reports among both customers and restaurant workers have ceased in Oregon.

Due to the changes in pricing of latex gloves and their alternatives, hospitals, medical and dental offices, and food service establishments would obtain a cost savings by switching to non-latex alternatives. Today the cost of latex gloves is greater than vinyl and nitrile gloves. Retail pricing for a box of 100 powder-free gloves for each type are as follows:

- Latex \$14.99
- Nitrile \$12.99
- Vinyl \$7.49

The cost of latex allergy is high. Costs of immediate emergency care, long-term chronic care, medical visits, medication, loss of earnings, employee absenteeism, loss of well trained and valuable employees, worker's compensation payments, Social Security Disability payments, liability suits, and legal fees are but a few examples. Additionally, businesses would save money by using cost-effective and viable alternatives to latex gloves.

It has been at least 30 years that latex has been recognized as a major occupational health hazard for health care workers and patients. Throughout the United States and Europe numerous hospitals, dental, and health care facilities have banned not just latex gloves but all latex materials. Why are we still discussing this issue? The Hippocratic Oath states "First, do no harm". It is incomprehensible that health care providers use materials that are well known to cause an incurable disease.

It is a shame that so many health care professionals, agencies responsible for public health and protection, and owners of facilities who deal daily with the public have not played a leadership role on this issue. But this is one of the many advantages in our form of government where states can play a key leadership role. In the case of latex glove use, I advocate for you to do the right thing and to set the gold standard by passing SB911, SD1.

Anna Salanti  
7619 SW 26<sup>th</sup> Avenue  
Portland, OR 97219  
[asalanti@gmail.com](mailto:asalanti@gmail.com)

## Bibliography

- Ameratunga, R., Amertunga, S., Crooks, C., and Simmons, G. (2008). Latex glove use by food handlers: The case for nonlatex gloves. *Journal of Food Protection*, 71(11), 2234-2338.
- Arizona Department of Health Services. (2001). Notice of Final Rulemaking Title 9. Retrieved from <http://www.azdhs.gov/phs/oe/fses/pdf/r981.pdf> on February 28, 2015
- Asthma and Allergy Foundation of America. (2001). Allergy facts and figures. Retrieved from <http://www.aafa.org/display.cfm?id=9&sub=30#prev> on February 16, 2015.
- Benco Glove Handbook. (2014-15) Five Finger Discount Club. Retrieved from <http://viewer.zmags.com/publication/6f82936c#/6f82936c/14> on March 1, 2015.
- Grieco, T, Faina, V., Dies, L., Milana, M., Silvestri, E. and Calvieri, S. (2014). Latex sensitization in elderly: Allergological study and diagnostic protocol. *Immunity and Ageing*, (11), 7. Retrieved from <http://www.immunityageing.com/content/11/1/7> on February 28, 2015.
- Grzybowski , M., Ownby, D., Rivers, E., Ander D, and Nowak, R. (October 2002). The prevalence of latex-specific IgE in patients presenting to an urban emergency department. *Annals of Emergency Medicine* 40(4), 411–419.
- Holter, G., Igrens, A., Nyfors, T., Aasen, E., Florvaag, K, Overa, S. and Naerheim, J. (2002). Self-reported skin and respiratory symptoms related to latex exposure among 5,087 hospital employees in Norway. *Dermatology*, 205, 28-31.
- Hume, S. (2003). Oregon soon to ban latex glove use. *Oregon and Restaurant Lodging*. Retrieved from <http://latexallergyresources.org/articles/oregon-soon-ban-latex-glove-use> on February 28,2015.
- Kurup, K., Reijula, V., and Fink, K. (1994). The diagnosis of natural rubber latex allergy. *Journal of Allergy and Clinical Immunology*, 3, (5), 813- 816.
- National Institute for Occupational Safety and Health. (1997, July 23). NIOSH alert on work-related latex allergy recommends steps to reduce exposures. Retrieved from <http://www.cdc.gov/niosh/updates/latexpr.html> on February16, 2015.

Neugut, Alfred, I, Ghatak, Anita T, Miller, and Rachel L. (2001). Anaphylaxis in the United States: An Investigation into its Epidemiology. *Archives of Internal Medicine* 161(1), 15-21.

Office of Food Protection. (n. d.). Food Service in Rhode Island. *The Latex Food Safety Act*. Retrieved from <http://latexallergyresources.org/articles/food-service-rhode-island> on February 28, 2015.

Phillips, V., Goodrich, M., and Sullivan, T. (1999). Health care worker disability due to latex allergy and asthma: A cost analysis. *American Journal of Public Health*. 89(7), 1024-1028. Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1508827/> on February 16, 2015.

Pien, L. (August 2010). Latex allergy. *Cleveland Clinic Medicine*, Cleveland Clinic, Ohio. Retrieved from <http://www.clevelandclinicmeded.com/medicalpubs/diseasemanagement/allergy/latex-allergy/> on February 28, 2015.

Oregon Department of Human Services. (2005). Oregon dermatitis prevention. *Putting Data to Work*. Summer 2005, 2. Retrieved from <https://public.health.oregon.gov/HealthyEnvironments/WorkplaceHealth/Documents/Edition1.pdf> on March 1, 2015.

Sussman, G. and Gold, M. (1996). *Guidelines for the Management of Latex Allergies*. Ontario, Canada: CHA Press.



Hawaii State Legislature SB NO. 911

Ways and Means Committee

March 2, 2015

My name is Victor Gennaro. I am writing in support of SB No. 911 – A Bill For An Act Relating To Latex – prohibiting the use of latex gloves in dental, healthcare, Emergency medical services and food establishments.

I have been allergic since I was 5 years old. My mother, a physician who has a severe latex allergy, noticed I had a bad reaction to a Band-Aid. My skin was actually sloughing off under the area that the Band-Aid was covering. I had no further issues as my mother made sure that no one used latex around me and that we only went to latex free restaurants. Where I grew up in NH the hospitals were already latex-safe and many restaurants had changed their practices after my mother wrote them a letter explaining the risks of latex gloves.

Growing up we were unable to have latex balloons in the house, we could not go to restaurants that used latex and my mother could not go into many stores – especially sporting goods stores. We were unable to have any toys made out of latex, which limited us to Legos, puzzles and Fisher Price.

It was not until I got to college and ignored my mother's advice that I discovered I really was allergic to latex. I began to notice if I ate in a restaurant that used latex gloves extensively I would have stomach cramping and depending on the exposure diarrhea after.

I did not realize that latex was in 40,000 products and as a healthy young college student found out the hard way – no pun intended- that I could not use certain types of contraception. The reaction was severe, uncomfortable and most

embarrassing.

I was recently very ill and had to go to the Emergency Room. I had severe diarrhea and cramping. Nothing made me better except time. I had no fever. I was diagnosed with colitis and told it would clear up. I do not know if the doctors used latex gloves on me when they examined me. I have not had the problem since. I believe this was a severe allergic reaction to latex ingestion. I lived in Los Angeles, CA at that time where most restaurants use latex gloves and I had been eating out with my girlfriend twice that day. It was shortly after the second meal that this began.

Please ban latex from medical, dental, emergency medical service and food service. The latex protein transfers to any surface or liquid it touches. It becomes part of the food or medication. If someone gives me that food or that medication I could have an anaphylactic reaction and possibly die. If the ambulance comes and they are using latex gloves and supplies like syringes with latex plungers, vials of medication with latex stoppers, oxygen delivery systems with latex in the tubing/bag or IV tubing that has latex they will only make me worse and possibly kill me. When you

are having a medical emergency you do not want to worry that the people coming to help you could make you worse.

I know, because both of my parents are physicians, that you can safely treat patients, even operate on patients, without using any latex products. I know that the food service industry does not need to use latex gloves in food preparation there are many, less expensive, gloves that do the job just as well.

Please look favorably on SB No. 911 and prohibit the use of latex gloves and utensils in EMS, dental, healthcare and food service. Thank you

Victor John Gennaro

[Victor.gennaro@gmail.com](mailto:Victor.gennaro@gmail.com)

Berkeley, CA

Hawaii [SB](#) 911

Debra Scott, tourist and frequent traveler

To the Ways and Means Committee of the Hawaii Senate,

Thank you for reviewing this bill to ban the use of latex gloves in food service and health care. I would like to tell you a bit about how this affects me, as a tourist.

For our 10<sup>th</sup> anniversary, my husband and I wanted to celebrate in Maui. Our 2003 honeymoon (before my latex allergy became severe) was in Kauai and we wanted to go back, but explore one of the other islands. By 2013, my sensitivity to latex had progressed to the point where, per my allergist, I had zero tolerance for natural rubber latex in any form, contact, airborne, or ingested. Many of my reactions by now required lifesaving epinephrine, ambulance and hours spent in the emergency department restoring vitals and pulmonary function. Food handled with latex gloves in any part of the farm to fork process caused me to go into severe anaphylaxis, due to the transfer of latex proteins from the gloves to the food. Even groceries I had to wash repeatedly to remove any possible traces. I also could no longer enter any building or office where latex gloves were in use including restaurants and hotels, because I would react within minutes of walking in the door.

For our Maui trip, I worked for several months, trying to find the needed combination of latex free hotel, nearby latex free restaurants and latex free emergency care (ambulance and emergency dept) so that I would be able to survive the vacation without serious repercussions. As our anniversary approached, I finally told my husband we would have to settle for someplace close by, where the options were safer. We were both very disappointed.

If HB 1238 and SB911 are enacted, we will be able to finally recreate our honeymoon dream.

I would also like to add testimony regarding latex in health care and restaurants, based on my personal experiences with over 100 anaphylactic reactions just since 2010. First, in medical care, I can not have a needed surgical procedure that uses special equipment, because the only facilities equipped for it near me use latex gloves. I have had to change my PCP of 6 years when my doctor moved his office, because others on his floor use latex. I have had to change my pain medicine doctor, who would not stop using latex gloves, and change again when I repeatedly reacted to the latex gym equipment attached to the office of the new doctor, who became afraid for me to even enter the clinic anymore after witnessing several of my reactions from the airborne latex in the gym. I cannot go to needed physical therapy because of latex therapy equipment in all PT offices. Even dental care has become difficult to obtain as all of the exposures to latex have made me so sensitive that I now react to even the use of rubber bands and printers (commercial printers often have a latex overspray). My dentist of 7 years sent me a letter that said it was not safe for me to be seen in his office anymore.

In food service during a trip to Washington state, I enquired at a restaurant and was assured they only used vinyl gloves on food. After a couple bites of the bread, I went into anaphylaxis, used epi, took benedryl. It was soon clear that I was going to need a second epi, so went to ER for anaphylaxis treatment. I called the restaurant the next day and found out where the bread

was made. That bakery used latex gloves. Latex transfers easily from gloves to food, and stays on it indefinitely. Dr Beezhold, Chief, Allergy and Clinical Immunology Branch of the [Centers for Disease Control and Prevention](#), addresses this question: "Yes, latex proteins are transferred to almost any surface that is contacted by natural rubber latex gloves (1,2). This transfer is dependent on the concentration of NRL protein contaminating the glove and the texture of the surface that is contacted. The presence of moisture on the contact surface will enhance the transfer. We know that latex allergic patients can have severe allergic reactions to foods handled by latex gloves (2,3) where food cross-reactivity is not an issue. Low protein gloves transfer proteins at a level that we can not detect in the laboratory, however some highly sensitive patients may still be able to detect them. Based on our understanding of the available data, it is highly recommended that food handlers do not wear latex gloves." - See more at: <http://latexallergyresources.org/ask-the-expert/are-latex-proteins-natural-rubber-latex-gloves-transferred-food#sthash.TRiDrav3.dpuf>

As a tourist in France last year, a restaurant assured me months in advance they only used latex free gloves. The hospital also assured me that the ambulances did not use latex. When the waiter at the restaurant stepped close to recommend a menu item to me, I immediately reacted with severe throat swelling and asthma from latex residue on his clothes. The manager then confirmed that latex gloves were in use in the kitchen after all. The reaction developed quickly to full anaphylaxis, requiring 2 epis before ambulance could arrive. But the ambulance that came had latex gloves and caused my reaction to get significantly worse. I had to wait for nearly an hour, barely able to breathe, until they could strip basically a delivery truck equipped with only a gurney to transport me to the hospital. As France has no law prohibiting it, we found latex gloves in use in nearly every place we visited, so that I ended up spending most of the trip very ill, and unable to enjoy this beautiful tourist destination.

Another recent exposure was to latex gloves in use at Whole Foods in my hometown. WF normally does not use latex on anything. I was already having a reaction and did not know the source. I was surprised to see what looked like latex at the seafood counter and asked the fish handler to show me the box. When he pulled a latex glove out for me my reaction turned to full anaphylaxis. I used epi and all my rescue meds and was transported by ambulance immediately to ER, treated en route with rescue meds, oxygen, and IV, then treated further at the ER where I went into a rebound reaction requiring yet another epi, etc.

This is how critical it is for there to be a law that prohibits latex gloves in both food service and health care. Without a law, people can do as they please and are not worried about the potentially lethal consequences of their actions. How many lives have been saved by the seat belt law? How many people will avoid cancer from second hand smoke from the laws restricting cigarette smoking in public buildings and restaurants? How many children will no longer develop latex allergy if latex gloves are banned from the food they eat and the medical and dental care they receive? How many worker's comp cases will you avoid from occupational exposure to latex gloves?

Latex gloves are dangerous, and completely unnecessary with many safe alternatives available, including just washing hands thoroughly. I grew up traveling around the world with my family as

my father was in the Peace Corps and continued to enjoy frequent domestic and world travel as an adult for both work and pleasure until recently. I have had to severely limit tourism and can only travel to places I have spent months researching to make sure it will be safe. I have family and friends in Hawaii, and cannot come to visit them as the situation is now. Please pass this bill, and make Hawaii a welcoming place to explore and reconnect for me, and for more than 3 million people in America who have latex allergy. Please pass this bill for all of your Hawaiian neighbors, like Katie Jacintho, who have latex allergy now and for all of those who will develop it soon if you do not pass the bill.

Thank you for hearing my testimony

Debra Scott  
2330 St Francis Dr  
Sacramento, CA 95821

I am writing to you in support of the Hawaii SB 1238 bill with regards to latex regulations. I was diagnosed with a latex allergy when I was about 4 years old and over the course of my life I have watched it grow and progress from a reaction as simple as a rash to something as complex as temporary paralysis, tachycardia, anaphylaxis, potential kidney damage and so, so much more. This is, unfortunately, a progressive disease that has no cure and very few, very risky, treatments. I am not writing to you for sympathy, but contrarily to raise awareness so that you can make sure that nobody else has to go through what my family and I have been through.

Here is my story:

I was born premature and therefore, I had numerous health problems in infancy. Most likely, the combination of latex exposure (from latex gloves and equipment in the hospital) and my family history of latex allergies caused the onset of my allergy. Initially, I had simple contact dermatitis, so as long as I didn't touch a large amount of latex, then I wouldn't have a reaction. Unfortunately, when I was diagnosed, most doctors were not aware that latex was a progressive allergy, meaning that every exposure I had could potentially make my allergy worse. So as a result, I also did not have this information...

My allergy finally progressed to a new stage when I was 14; I began to have facial swelling. I noticed that I became extremely ill when balloons were nearby and I was unable to use certain products that I then noticed contained latex. There was an incident where my dentist grabbed the wrong gloves (possibly due to her latex-glove-grabbing muscle memory) and I woke up the next morning with a swollen face and lips. I found that there were many restaurants where I thought that I had gotten food poisoning and so I stopped eating there (I now know that I was having gastro anaphylaxis due to their use of latex gloves). I learned very quickly what I reacted to and I adapted.

I had been semi-reaction-free for a few years until a hospital made a grave mistake. I was admitted to a hospital, about two years ago, because I had esophageal ulcers. Upon admittance, I was given a flu shot – a latex-laced flu shot (and yes, I had already warned them about my latex allergy). I spent the next few days in and out of consciousness with cycling bouts of heart palpitations, extreme fevers, and swelling that rendered one of my arms temporarily useless. I partially recovered (very slowly) and I thought that it was behind me, until my next hospitalization occurred in March of last year. I went in for a simple outpatient sinus surgery and wound up staying in the hospital for six days. I had been given the wrong IV (latex), had the wrong syringes used (latex), had been given medication that was housed in a latex container, and had many other unfortunate exposures. I woke up after the surgery just in time to save my own life. I felt liquid filling up my lungs, my legs, my arms, and my chest. I felt my whole body swelling up (ironically) like a balloon. Over the course of the next few days I had numerous doctors and countless nurses working around the clock trying to save my life. It took almost three days of me telling the doctors that I was having an allergic reaction before a nurse (NOT a doctor) realized that I was being given latex. This is precisely why these reactions are going unreported. I knew that I was allergic and I knew that I was having an allergic reaction to latex, but the doctors did not understand this allergy well enough to

recognize the symptoms. I can only imagine what would have happened if I hadn't known that I was allergic to latex. While I was fortunate enough to leave that hospital with my life, I also left with a great deal of irreparable damage.

Suddenly, at 22 years old, my life drastically changed. I had to be worried about doctor's offices (latex gloves), grocery stores (latex gloves and balloons –a double whammy), the way my food was prepared and packaged (latex gloves, adhesives, and other things), the clothes I wore, and so much more. If I am ever in need of emergency assistance, I will not be able to get it. Police officers, firefighters, and most importantly EMTs often times use latex gloves. My Medical ID bracelet doesn't do much good if they check it while wearing their latex gloves. In one year, I graduated college, temporarily became a quadriplegic, learned how to pee in a bedpan, had a crash cart called on me, and almost lost my life to my illness (which will most likely happen if things do not change). People like me are in great need of some help and are desperately looking for some hope.

Please do not read my case and think that this was a 1 in a million type of situation. It's not. If it was, then this bill would not have been put forward. If you do not believe me, then look on the American Latex Allergy Association's website under "Latex Allergy Stories." Or, if you search on Google, then you will see numerous testimonies just like mine. There have been too many of us whose lives have been risked or lost because of the unnecessary use of this allergen. Please, please, help us put a stop to it.

Thank you for your time,

Jillian LeMaster-Dwyer

Here are some photos for your reference.

Before





During:



After:



Senator Jill N. Tokuda, Chair  
Senator Ronald D. Kouchi, Vice Chair  
**Committee on Ways and Means**

Tuesday, March 03, 2015

Support for SB 911 Related to Latex

These are the current latex allergy statistics from the American Latex Allergy Association: it is estimated that... 1 in every 1000 has a latex allergy...

- 18-73% of people with Spina Bifida
- **38% of dental care workers**
- 34% of children who have three or more surgical procedures
- **10-17% of Health care workers**
- 11% of rubber industry workers
- 6.8 % of atopic (allergies) individuals
- **8.3% of the general population**
- Also recently it was noted that **11% of the elderly** also have a latex allergy <http://www.immunityageing.com/content/11/1/7>

I am a mother of a 16-year old daughter that has a severe latex allergy. My daughter's latex allergy was diagnosed at 2 years of age after a dental appointment; the dentist gloved hand imprint was left on my daughters face in the form of hives wherever the dentist had touched her. From a contact dermatitis, my daughter now has reactions from airborne latex particles. She became reactive to airborne latex at 5 yrs. old, at a birthday party where the clown was releasing the air out of the balloons. I didn't even carry Benadryl in those days; just removed her from the area and washed her hands and face.

There is no cure for a latex allergy, only prevention of future reactions by avoidance of latex. With each latex exposure the person's reaction may increase to the next level.

I became aware of inconsistencies in latex allergy awareness and education, when my daughter was seeing an orthodontist at the age of 8. He was made aware of her latex allergy; he said it would not be a problem. At first she was seeing him in a consulting room separate from his treatments room. When she was 12 and had her braces applied she was then being treated in an open room that the orthodontist had 3 other patients at the same time he went from patient to patient. The orthodontist felt it was okay to just change from Latex gloves to latex free gloves to treat my daughter. She had 3 different reactions at 3 different appointments. The reactions progressed. As she walked out of the

office her throat felt funny, her lips started to swell and her eyes became itchy and watery. I gave her Benadryl immediately and drove her straight to Maui Memorial ER we were fortunate that they are a latex- safe- facility. They treated her with prednisone and instructed me that she would require Benadryl around- the- clock for up to a week to treat the residual reactions. Her residual reactions lasted 3 full days. With the latex exposure at the orthodontist's office, my daughter now is required to carry an EPI pen where ever she goes. I did phone the orthodontist immediately after going to the ER and he said he didn't want my daughter to return to his office as "She is just too overly sensitive."

We did find a latex safe orthodontist to remove my daughter's braces. Even though they used latex free gloves, they did not understand the extent of latex allergies and the severity of potential reactions.

Latex is an airborne toxin and, like dust, its residue floats in the air and remains on surfaces, including food. My daughter also reacts to food that has been touched with latex gloves or utensils. Upon digesting food that has been touched or exposed to latex her reactions start with a "funny feeling" in her throat and progresses to tongue and lip swelling requiring administering of medication and monitoring to prevent her reaction from going to anaphylaxis.

There are over 40,000 latex products in our environment; the American Latex Allergy Association has provided a guide to help a person with a latex allergy to help maneuver through the many latex obstacles in everyday life. <http://latexallergyresources.org/consumer-products>

The one thing that is difficult to maneuver through as a person with a latex allergy, though, is the use of latex gloves. Medical facilities, dentist, emergency vehicles, and food entities do not display warning signs, or warn patrons by noting latex glove use on their menu.

Even grocery stores can be unsafe. We've had to leave a grocery store immediately due to my daughter starting to have a reaction. Once we got to the produce aisle when my daughter's throat started to "feel funny" and her eyes started to itch. Upon looking around we saw that the produce clerk was wearing latex gloves while putting the vegetables in the display bins.

Our family is fortunate that we have a farmer that produces CSA Baskets (produce). He has changed his harvesting practice to accommodate our needs, and has extended it to all his customers. He stopped using latex gloves and rubber bands and only uses twist ties when bundling the vegetables. He said it was a no brainer for him as the safety and wellbeing of his customers always come first. There was no increase in cost of his operating expense; it was just a matter of changing his ordering practice.

Per the American Academy of Allergy Asthma & Immunology "The 1990 Americans with Disabilities Act (ADA) covers people with severe allergies to substances such as latex"

<http://www.aaaai.org/conditions-and-treatments/Library/At-a-Glance/Latex-Allergy.aspx>

My daughter is a student at Maui High School and we have a 504 plan in place. Principal Bruce Anderson has been very supportive educating his staff about Latex allergy. Mr. Anderson even suggested that the video journalism students to do a PSA on latex allergy awareness and was accomplished as a PBS HIKI No Segment last year. <http://vimeo.com/96538486> . In this segment

Principal Anderson mentions he educated staff and teachers and changed his ordering practices. He has told me there was no difference in cost and alternatives are readily available.

With my daughters 504 plan I needed to inquire about Emergency transport if that was ever required. Upon inquiring, before the 2013 school year, with American Medical Response that Hawaii has contracted for emergency vehicle transport, I found a difference of practice. The Oahu contact told me that they use only latex free gloves in their vehicles, but the Maui contact told me that they carry both latex and latex free that it was the preference of the EMT personal, as some prefer to use latex and some latex free. We need legislation in place to have consistency of care for public safety. If there is a traffic accident and the person is unresponsive not wearing a medical alert bracelet, exposing them to latex gloves could put them in danger if they have a latex sensitivity. Even being in a vehicle that carries both latex and latex free gloves puts the patient at risk. Latex is an airborne pathogen you do not have to be touched to be exposed to the latex airborne toxins that will cause you to react. Why would an emergency vehicle risk that? 1 in every 1000 people has a latex allergy or a sensitivity that can progress at any time why put someone at risk when latex free gloves are readily available.

With the Bare Hand Food Code, eating prepared food has become another danger. A latex allergy sufferer must inquire, if latex gloves, utensils, or conveyor belts have been used in the preparation and handling of the food. Even in harvesting of the vegetables or bread, which the restaurant may not even be able to answer if this food has been sourced from another facility.

In October 2014 The Maui Culinary Arts director allowed a latex allergy informational display table to be set up outside of the UHMC Paina building. We spoke to several culinary instructors and the program has changed their ordering practices and stock only latex free gloves. They have incorporated Allergy education in their programs including information on latex allergy awareness.

With our latex allergy awareness display several Student nurses came up and were very interested in learning more about latex allergy, they mentioned they are made aware of latex allergy but not the extent of it. One student nurse mentioned she gets a rash from rubber bands she did not realize that latex gloves were Natural Rubber Latex and she was at risk being exposed to latex. One lady told me about her experience at the dentist. She told the dental Hygienist she was allergic to the latex gloves, the hygienist did not believe her she touch the patient on the arm and no reaction was present so the hygienist continued to treat her, while wearing the latex gloves. The lady told me when she got home is when the reaction hit her. She was sick for a whole week. Allergic reactions don't always occur immediately; they can be slow and take 20 minutes to a few hours to appear. There have been several deaths of children having reactions hours after being exposed to allergens. The same can happen with a latex allergy.

If you have a latex sensitivity, eat out and get gastric symptoms, you may just think that food didn't agree with you, but it may be from the latex glove use in the preparation of the food. Latex residual remains on a surface for 24 hours. You cannot see it nor smell it, you will digest it, if food has been prepared with latex gloves.

I belong to a latex allergy support group. Daily we hear of a member's story recounting their reactions that they have had from food handled with latex gloves. Even though precautions are taken by screening restaurants carefully on their latex glove use, it is not enough. Food maybe outsourced, or farmers in the field may have used latex gloves while harvesting.

Traveling is also difficult. In 2012, my daughter's school went on a national park adventure traveling by plane, car and train throughout the western United States to Yellowstone, Grand Tetons and Yosemite. At that time, the airlines could not guarantee that latex gloves would not be used in the cabin. The airlines instructed me that I could bring latex-free gloves for the flight crew to use while we were on board. They could not guarantee that the food that they were serving would be latex-free, so we took our own. With the TSA restrictions of what you are allowed to carry on board we were limited to dry crackers. Most snacks, energy bars and treats available in vending machines have a latex-based adhesive seal In order for the adhesive not to touch the treat; a scissors is required to open the package, which was not allowed in our carry-on bag. Being that we traveled from Hawaii we had several stops and connections on different airlines requiring an overnight stop over. The hotel was able to provide a latex-safe room but advised us that the kitchen did use latex gloves. We were unable to eat at the airport as the food vendors also used latex gloves. It was two days before my daughter was able to eat a latex-safe meal at Olive Garden that has a corporate "No latex Glove Use" policy.

One of the stops was to a Six Flags amusement park. It was nice to see the food concessions all used latex free gloves. However, my daughter had a prepackaged Ice cream treat and developed an allergic reaction. My daughter could smell the latex in the wrapper when she took a bite of the ice cream with the open wrapper still attached to the ice cream stick. Her throat started to get tight and her lips and tongue tingled. She required 50 mg of Benadryl and had residual reactions for remaining 3 days of the vacation.

The passing of SB 911 is very important. The bill will help with consistency and continuity of care. Remove the risk of developing a latex sensitivity /allergy from overexposure of latex in the workplace

There are many alternative products: vinyl, nitrile, poly, and new synthetic gloves and medical supplies. There are even latex-free finger cots. There is no increase in cost for latex-free gloves. In fact, latex-free gloves are cheaper by 1-2 dollars, per the Uline Business supply catalog. [http://www.uline.com/Grp\\_366/Nitrile-Gloves?keywords=latex+free+gloves&pricode=WF908&AdKeyword=latex%20free%20gloves&AdMatchtype=e&gclid=COfw9T8zMMCFY9ffgodNoAArA&gclsrc=aw.ds](http://www.uline.com/Grp_366/Nitrile-Gloves?keywords=latex+free+gloves&pricode=WF908&AdKeyword=latex%20free%20gloves&AdMatchtype=e&gclid=COfw9T8zMMCFY9ffgodNoAArA&gclsrc=aw.ds)

Three states have Latex Legislation in place Rhode Island, Arizona and Oregon. It would be wonderful if Hawaii joins them.

Rhode Island: Enacted 2001 - H 5907A Latex Glove Safety Act enacted on 7/13/01 <http://latexallergyresources.org/articles/food-service-rhode-island>

[http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/DOH\\_2008\\_.pdf](http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/DOH_2008_.pdf)

Arizona updated the food code to ban latex gloves and latex utensils

[http://www.fda.gov/ohrms/dockets/ac/03/slides/3977s2\\_Herrington.ppt](http://www.fda.gov/ohrms/dockets/ac/03/slides/3977s2_Herrington.ppt)

<https://extension.arizona.edu/sites/extension.arizona.edu/files/resources/fs04handlingreadytoeat.pdf>

Oregon latex glove ban

<http://latexallergyresources.org/articles/oregon-soon-ban-latex-glove-use>

Oregon: Dept. of Human Services Food Protection Program State Rule OAR [333-150-000](#) Section 3-30415: Bans use of latex gloves in food service facilities Went into effect 7/1/2006.

[www.oregon.gov/DHS/ph/foodsafety/docs/foodsantiationrulesweb.pdf](http://www.oregon.gov/DHS/ph/foodsafety/docs/foodsantiationrulesweb.pdf)

John Hopkins Hospital became a latex safe facility in 2008 “ in an effort to make medical care safer for patients and health care workers, The Johns Hopkins Hospital has become the first major medical institution to become “latex safe” by ending all use of latex gloves and almost all medical latex products”.[http://www.hopkinsmedicine.org/news/media/releases/rubber\\_gloves\\_born\\_and\\_now\\_banned\\_at\\_johns\\_hopkins](http://www.hopkinsmedicine.org/news/media/releases/rubber_gloves_born_and_now_banned_at_johns_hopkins)

Hawaii Senate Bill 911 is very important. Removing latex gloves use in medical/dental/health facilities, emergency response and transport vehicles, and all food entities will help to remove a substantial risk to a person with latex allergy. It will also remove the risk of employees being exposed to the over use of latex which increases their risk of developing a latex allergy.

Thank you for this opportunity to share my family’s personal experience and encourage your support of SB 911

Anne Marie Owens Jacintho  
880 Naalae Road  
PO Box 473, Kula Maui, Hawaii 96790

HM 808-878-2660 cell 808-280-5056

Hawaii State Legislature  
Committee on Ways and Means

March 2, 2015

To Whom It May Concern:

My name is Trish Malone and I have a severe allergy to latex. Specifically Type I (immediate-type) hypersensitivity Natural Rubber Latex Allergy (NRL). - See more at: <http://latexallergyresources.org/definition#sthash.0ALUopOW.dpuf>. There is no cure for latex allergy, which affects me along with approximately 3,000,000 people in the United States, and in fact symptoms generally get worse with repeated exposure. That means it can change from an annoying allergy one day to a life threatening one the next. Somebody who today gets an itchy rash from a Band-Aid might be fighting for their life tomorrow after having been in the same room as a balloon. For those of us with this allergy, our bodies cannot handle being exposed to latex. Our bodies see latex as a foreign invader that it must fight off and our bodies go haywire in doing so. For me that used to mean if I came into contact with latex I would get a skin reaction, a red rash and blisters, but with repeated exposure it now means when I come into contact with latex, my body reacts with anaphylactic shock. In my case along with other symptoms, my tongue swells and my throat closes which, if not immediately treated, can be fatal. I take daily antihistamines to try to dull my body's automatic reaction. I also must keep multiple Epi-pens and more antihistamines on me at all times. Every minute of every day is spent trying to keep myself safe from an often invisible invader. My daughters also have a latex contact allergy and I am doing everything in my power to keep them from developing an anaphylactic reaction.

I am hyper-vigilant in buying only latex-free items for my family. From erasers and shoes to toothbrushes and exercise equipment latex is everywhere, but I research like crazy and protect myself and my family as much as humanly possible. Where I have had my most severe reactions however is somewhere I cannot control, in restaurants.

Dining out for a latex allergy sufferer is like playing Russian roulette. I always call ahead before eating anywhere, but the front of the house staff does not always understand what goes on in their kitchen. I have had MANY reactions when the host and/or server told me no gloves were used in their kitchen only to find out that gloves are used when cutting meat or other preparation work. Even speaking with the kitchen manager or Chef doesn't guarantee I will be safe. I have had reactions because someone on the morning prep line handled my food with latex gloves hours before and the Chef thought it was safe for me to eat because he/she cooked my food without wearing gloves. Just having latex gloves in a kitchen at all puts us latex allergy sufferers at risk. If one particle gets on our food we can die.

It is has also become very difficult to travel out of my home area unless it is to a state that has banned the use of latex because I never know if there will be any safe places for me to eat when I arrive. For example, my husband and I travelled to Las Vegas recently and could only find ONE restaurant that was latex free and that was because one of their servers had a latex allergy. In a city as big as Las Vegas, I had ONE dining option. I will not likely be returning to Las Vegas for this reason alone. I also don't know if there will be any safe place to receive medical care.

I am VERY lucky to live in an area where most hospitals, EMT and doctors offices have elected not to use latex gloves and many won't allow latex balloons to be brought into their buildings because of the risks involved to their staff and patients. I know that this is not the case in many areas and I am very reluctant to travel anywhere that has not banned the use of gloves in the medical field for my own safety. Imagine having an allergic reaction, calling 911 and being treated by someone wearing gloves made of the exact same thing you are deathly allergic too. That is a risk I cannot take.

There is currently little to no legislation in most states protecting latex allergy sufferers like myself from being exposed unknowingly to a potentially deadly allergen by contact with food by food services workers wearing latex gloves. In addition, the workers are being placed at risk of becoming allergic themselves by

repeated exposure to latex gloves. This risk can be mitigated very easily and inexpensively by banning the use of latex gloves in food preparation. Alternate gloves such as vinyl, nitrile or polyvinylchloride are readily available for purchase and at a similar cost to latex without any of the risk. A search today on Amazon.com shows that in fact vinyl gloves can be less expensive than latex ones:



I appreciate your time and am available by email or by phone if I can answer any questions you may have.

Sincerely,

Trish Malone



My Name is Debra A. Whitemaine, I live in Pennsylvania and I have a severe latex allergy. I react to air bourn, contact and food crosses.

On October 10, 2014 I accompanied my family to a local Long Horn Steakhouse. I brought my own food due to my severe food allergies. I normally don't even go to restaurants but I had family here from out of town. I called the restaurant and asked if they used latex gloves and I was told they used vinyl.

We were in the bar area waiting for our table. Within 10 minutes of being there I started to feel a reaction starting. I wasn't sure of the cause but it felt latex related. I was experiencing chest tightness, raspy voice and funny feeling in my head. The waitress seated us and I asked if latex gloves were used in the kitchen. I explained my latex allergy to her and that I was having a reaction. She returned and said they used latex and vinyl gloves. I immediately left the building and sat in my car while everyone else enjoyed their meal. I took Zyrtec, used my rescue inhaler and performed acupressure message points to reduce the symptoms. When my family members got into my vehicle to go home I was triggered again because the particles were on their clothing. I took a Pepcid AC once I arrived home for my ongoing symptoms.

I give permission for my story to be used in promoting latex change laws.

**SB911 :An act that prohibits the use of latex gloves in dental health facilities, health care facilities, by personnel providing ambulance services or emergency medical services pursuant to the state comprehensive emergency medical services system, and in food establishments.**

My name is Carolyn Mirek. I serve on the Town Council in South Windsor, CT and I have a life-threatening latex allergy. I support the latex ban in Hawaii to prevent others who have a latex allergy or who could develop latex allergy from being exposed to a known allergen without their knowledge. I am grateful for the opportunity to explain why latex-free gloves can protect both consumers and those who work with gloves.

I was licensed in 1983 to practice dental hygiene after graduating from Northeastern University and Forsyth School for Dental Hygienists. I served as a trustee to the Connecticut Dental Hygienists' Association and was an active member of the Hartford component, later serving as President of the Hartford Dental Hygienists' Association. I have presented lectures to dental hygienists about latex allergy. In 2001 I was disabled from my career as a registered dental hygienist due to latex allergy. I also have permanent partial disability as I may inadvertently have other exposures to latex. Having to change my career was the hardest thing I ever had to do. How could I provide for my family now? My insurance denied my claim. I was forced to fight a long grueling battle culminating in a six day federal jury trial followed by a bad faith claim. First, I had to sue the glove manufacturers to prove their liability. These events were extremely stressful. I went through counseling while mourning the loss of my 18 year career as a dental hygienist. I started fresh, retrained for a career in dental sales, although I must practice strict avoidance of latex. Who knew that the latex gloves that I wore for protection while treating dental patients could cause life threatening anaphylaxis? If I enter a room or business that has latex balloons, I must leave immediately. Latex particles are invisible: I cannot see latex toxins in the air or food.

Here are a few examples of my past latex allergy reactions. In 2001, my family was having lunch at an amusement park in Connecticut. After one bite, my eye swelled shut, and I could not breathe. I saw the box of latex gloves behind the counter. Unprepared, I soon learned that the park was also unprepared- without an emergency kit, Benadryl, or EpiPens. Imagine how frightening that was for my four and six year old children! I knew I was sensitive to latex gloves, but no one ever told me that anaphylaxis could occur from latex touching my food. I had been eating latex without my knowledge, and it could kill me! According to the American Latex Association, latex gloves are dangerous in food preparation since proteins shed from the gloves onto the food. Eating food contaminated with latex proteins can cause anaphylactic shock and possible death in sensitive individuals. At my husband's company party, I ate latex contaminated baby greens and vinaigrette which caused severe nausea, vomiting, diarrhea, swelling, hives, and airway closure. A year ago, one restaurant assured me prior to and reassured three more times that they did not use latex gloves. I had anaphylaxis after one bite of food. Later, the manager admitted, "Oh yes, the chefs did use some latex gloves." In July 2014, I had my most severe reaction ever, and I thought I was going to die. I was transported by ambulance to Saint Francis Hospital.

How many people have latex allergy? The number of people with latex allergy is under reported. Diagnostic tests are unreliable and not standardized in the US. Many family physicians do not

realize they need to diagnose latex allergy based on clinical symptoms rather than unreliable and expensive tests. Thus, many people don't know they have it. Many don't know they have it. I, personally, was undiagnosed for many years. When anyone today visits a medical or dental facility they are asked in their medical history if they have a latex allergy. It is common and severe! An estimated 15 million people worldwide suffer from latex allergy. According to The Spina Bifida Foundation, experts think latex could be a problem for up to 73 percent of children and youth with Spina Bifida. There is a rise in the number of elderly- now 11%. Among the general population it is reported, but probably exceeds up to 6% while healthcare workers it is 10-17%.

Oregon, Rhode Island, Boston, and Arizona have banned latex from restaurants. A restaurant in Manchester, CT recently went latex free because one of their cooks developed latex allergy. Why are food establishments putting their workers at risk when there are several safe and inexpensive alternatives? Restaurant chains such as Subway, Chipotle, Bonefish Grill and some others made a policy not to use latex because it made economic sense and was the right thing to do. However, others have a no-latex glove and utensil policy in food prep, yet allow latex balloons which makes the environment unsafe for the people with latex allergy. I sell gloves for my dental supply company and latex gloves are more expensive now than other types. So why would anyone choose the more expensive, life-threatening kind?

If a food establishment's policy is to protect and prevent cross-contamination, then why are they using latex gloves? Latex is proven to transfer and stick to food, glasses, and plates for 24 hours. Latex protein becomes a hidden food allergen. Latex particles from gloves, rubber cooking utensils, and balloons becomes airborne and inhaled. Workers in food service are often unaware of the latex risk and the potentially deadly consequences. Many professionals wear latex gloves today that did not before-such as food service, hair stylists, day care workers, repairmen, and janitors- and they are experiencing a wave of newly developed latex allergy like health care workers experienced since the 1980's.

The food safety manual "The Safe Food Handler" states: "Provide workers with non- latex gloves because latex gloves might cause a reaction in some workers." When some states banned latex glove use in the food industry, a major impetus for this was an increase in workers compensation claims related to latex allergy. Our own CT Department of Public Health website has a section titled "Food Protection." This article provides a link to Centers for Disease Control and Prevention's that since 1997: "Non-latex gloves are recommended for tasks (such as food preparation, routine housekeeping, and maintenance) that are not likely to involve contacts with infectious materials such as blood." Shouldn't the state of Connecticut abide by the CDC, especially if they list it as a reference?

Less expensive, safer alternatives to latex gloves are available. The risk of exposure to this hidden toxin being served to unsuspecting diners, as well as those preparing the food, can be eliminated. Latex allergies are real and preventable. Reduce the incidence of increased latex exposure, allergic reactions, workers compensation claims, lost wages, and disability claims. Let's follow the CDC Guidelines.

Thank you for your consideration, and I hope you will support this important SB 911.

Sincerely,

Carolyn Streeter Mirek, RDH  
48 Sele Drive South Windsor, CT  
[cmirek@cox.net](mailto:cmirek@cox.net)

## References:

[http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387486&dphNav\\_GID=1828](http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387486&dphNav_GID=1828)

<http://www.cdc.gov/niosh/updates/latexpr.html>

<http://latexallergyresources.org/articles/are-there-hidden-dangers-food-prepared-latex-gloves>

<http://www.latexallergyinfo.com/latexfreerestaurants.htm>

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4017681/>

[http://www.kintera.org/site/c.liKWL7PLlRf/b.2700271/k.1779/Latex\\_Natural\\_Rubber\\_Allergy\\_in\\_Spina\\_Bifida.htm](http://www.kintera.org/site/c.liKWL7PLlRf/b.2700271/k.1779/Latex_Natural_Rubber_Allergy_in_Spina_Bifida.htm)

[http://www.foodbase.org.uk/admintools/reportdocuments/11\\_27\\_Latex\\_final\\_report.pdf](http://www.foodbase.org.uk/admintools/reportdocuments/11_27_Latex_final_report.pdf)

[http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CCAQFjAA&url=http%3A%2F%2Fwww.fda.gov%2Fohrms%2Fdockets%2Fac%2F03%2Fslides%2F3977s1\\_Heumann.ppt&ei=BsvFVJGODYqZNRtcgcAH&usq=AFQjCNGGpBWF7Gj4w6zM8E1zFQuWeyl\\_Bg&sig2=5WkTkCGA\\_sIO88nNg\\_uKsKw&bvm=bv.84349003,d.eXY](http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0CCAQFjAA&url=http%3A%2F%2Fwww.fda.gov%2Fohrms%2Fdockets%2Fac%2F03%2Fslides%2F3977s1_Heumann.ppt&ei=BsvFVJGODYqZNRtcgcAH&usq=AFQjCNGGpBWF7Gj4w6zM8E1zFQuWeyl_Bg&sig2=5WkTkCGA_sIO88nNg_uKsKw&bvm=bv.84349003,d.eXY)

<http://latexallergyresources.org/articles/letter-us-dept-health-and-human-services>



To: Senator Jill N. Tokuda, Chair; Senator Ronald D. Kouchi, Vice Chair, Committee on Ways and Means  
Re: SB 911  
Hearing: 3/3/15 at 9:05am

My name is Catherine Ward, and I'm writing to present my testimony in support of measure SB 911. I am 40 years old and am disabled by a debilitating latex allergy. Before I became disabled, I had a wonderful career as a court-certified Spanish interpreter. Prior to that, I worked in the healthcare field as a Spanish interpreter where I was exposed to latex gloves, which may have contributed to me becoming sensitized to latex.

After sleeping on a new natural latex rubber foam bed I bought in November of 2012 for 10 months, I became extremely ill and was diagnosed with an airborne and contact latex allergy in October of 2013. Prior to that date, I was unaware of my latex allergy, but had suffered from severe asthma and multiple allergies since childhood. Earlier that year, I had started to have problems that were milder at first: hay fever-like symptoms, itchy eyes, watery nose, and chest congestion that later progressed to wheezing. The itching became much more severe in September of 2013 and felt like stinging on my head, stomach, legs and different parts of my body. These kept getting worse until even going into the bedroom without getting on the bed started to cause symptoms. I was reacting to the elastic in my clothing as well. I began to have worse wheezing/asthma, hives, and terrible confusion, dizziness and fatigue and would forget what I was doing. I didn't realize that what I was experiencing was anaphylaxis caused by the latex proteins in the bed. I had the bed removed to the garage; yet, I was still having severe latex allergy reactions due to latex residue that was left behind in the house from the bed and was coming in to the house from the garage. I began to constantly have severe allergic reactions to latex in everyday items such as rubber bands, balloons, printer's ink, and floor mats at home, at the grocery store, at medical offices and in any environment I found myself in. At work, I was having latex allergy reactions to my office chair, a plunger in the restroom, newly installed carpet, and my co-workers' rubber cell phone cases and latex exercise bands. No matter where I went I was always reacting to something made of latex.

I sought medical treatment for my latex allergy with a physician whose office I believed to be latex-safe because only nitrile gloves were used there. I would get symptoms of a severe latex allergy reaction every time I went there for treatment. I experienced itching and swelling of my mouth, throat, itching of my eyes, face and body, wheezing, and confusion. On two or three of these occasions, after I left the doctor's office, I experienced fever and chills, a migraine, and nausea and diarrhea along with the other symptoms. It would take two or three days to recover from this. One day I turned around where I was sitting in the exam room when the reaction started and saw that there was a stethoscope and a couple of other instruments made of rubber (latex) on a small table sitting right behind me, so we were able to identify that the doctor's instruments were causing my reactions.

I had been seeing another provider who had dropper bottles of medication on shelves in the lobby of his office. Every time I would go there, I would react to the airborne latex from the rubber in the dropper bottles as well as to the elastic used in the sheets on the tables where he did my treatments. Once I figured this out, I began to bring my own sheets but would still react to the residue of the latex elastic in the air from previous patients being treated. I would also react to just being in the room where he had a stethoscope (latex), even though he was not using it on me.

At my chiropractor's office, I was getting the same latex allergy reactions from the exercise balls he had in the room where he treats patients, so he replaced them with latex free ones. However, I still get latex reactions there, although less severe than before, because he still has some exercise equipment that contains latex.

I get severe latex allergy reactions from printer's ink (contains latex) in the air when I go into my doctor's office, even though no latex gloves are used there. I have to be seen outside in the back of the office whenever possible, and when I do have to go into the office, I wear a gas-mask type respirator, change my clothes when I leave, and then go home and take a shower immediately to remove the latex ink residue. I've also reacted to latex in some of their instruments such as a blood pressure monitor that was used on me and a stethoscope that was feet away from me and not being used on me.

I was referred to a neurologist for another condition but was unable to find one in my area that does not use latex gloves even though I spent days calling numerous neurologists, so I haven't been able to see one since it would be too dangerous for me to be exposed to the latex residue in the air from the gloves.

On January 21, 2015, I had an anaphylactic reaction which required the use of an EpiPen in order to stop my throat/airway from closing up, which was caused in part by eating off a paper plate that unbeknownst to me was contaminated with latex residue from latex glove use and in part from a sock which contained latex elastic inadvertently being left on top of the dryer while in use which caused latex particles to become airborne.

I am blessed to live in Arizona, which is one of the three states in the U.S. that bans latex glove use in food service. However, I have had severe allergic reactions in my own home caused by inadvertently ingesting latex glove residue on foods and tea I've consumed as well as paper plates I ate off. The following are a few of the products that caused me to have these reactions: Prince of Peace Organic White Tea Bags, ground elk, ground kangaroo, ground venison, and quail (all by Durham Ranch), and Hefty Diamond paper plates. I never imagined that I would now need to check every single product with the manufacturer before consuming it to be sure it hasn't been handled with latex gloves because the gloves shed or slough off microscopic latex particles which can cause a life-threatening allergic reaction (anaphylaxis) in an allergic individual. Upon consuming latex glove residue from contaminated products, I have experienced the following severe symptoms: diarrhea, stomach and uterine cramps, wheezing, itching, hives, low blood pressure, dizziness, fatigue, heart palpitations, swelling and itching of my mouth and throat, and have even had my throat closing up. After the most severe of these reactions, I realize how lucky I am to still be alive thanks to an EpiPen and treatment.

I implore you to ban the use of latex in food service and healthcare settings in order to protect others from becoming sensitized to it as well as to protect those who are already latex allergic from the risk of having severe, life-threatening allergic reactions from exposure to latex at restaurants and medical facilities. As a result, fewer people would have to face trying to live their lives with such an extreme latex allergy. You would be making Hawaii a much safer place for people to live and vacation, and your decision would save people from needless suffering and they could lead more productive lives. I happen to know several latex allergic individuals who plan their vacations exclusively in the three states where latex is banned in food service, so by passing SB911, Hawaii would become the fourth state in the U.S. that bans latex in food service and would be even more attractive to tourists by also having latex banned in healthcare settings! SB 911 will also save employers the expense of having to pay out Worker's Compensation claims because some employees

inevitably become sensitized to latex from using latex gloves at work and become disabled due to their latex allergy. SB 911 is a win-win proposition – your state will save money and bolster its economy by making itself a safer place for tourists to vacation and for residents to work, get safer medical care, and enjoy meals out at restaurants without the concern of life-threatening and possibly fatal anaphylactic reactions due to latex residue on food from the use of latex gloves.

Thank you for your kind consideration of my testimony in favor of SB 911.

Sincerely,

Catherine Ward

A handwritten signature in cursive script that reads "Catherine Ward".

16037 W Latham St  
Goodyear, AZ 85338  
623-882-9920





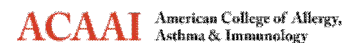
## Are latex proteins from natural rubber latex gloves transferred to food?

**Answered by:** Donald Beezhold, PhD, Senior Scientist

Yes, latex proteins are transferred to almost any surface that is contacted by natural rubber latex gloves (1,2). This transfer is dependent on the concentration of NRL protein contaminating the glove and the texture of the surface that is contacted. The presence of moisture on the contact surface will enhance the transfer. We know that latex allergic patients can have severe allergic reactions to foods handled by latex gloves (2,3) where food cross-reactivity is not an issue. Low protein gloves transfer proteins at a level that we can not detect in the laboratory, however some highly sensitive patients may still be able to detect them. Based on our understanding of the available data, it is highly recommended that food handlers do not wear latex gloves.

1. Beezhold DH, Kostyal DA, Wiseman JS. The transfer of protein allergens from latex gloves. A study of influencing factors. AORN 59:605-614, 1994
2. Beezhold D, Reschke J, Allen J, Kostyal D, Sussman G. Latex protein: A hidden food allergen? Allergy Asthma Proceedings 21:301-306, 2000.
3. Bernardini R, Novembre E, Lombardi E, Pucci N, Marcucci F, Vierucci A.

Anaphylaxis to latex after ingestion of a cream-filled doughnut contaminated with latex. J Allergy Clin Immunol. 2002 Sep;110(3):534-5.



2015 BEST CREDIT CARDS  
**0% APR**  
 FOR 15 MONTHS



CompareCards.com  
 Compare. Pick. Save.  
**SEE OFFERS**

 Follow Us On   


[Health Conditions](#)
[HealthDay Video](#)
[Wellness Library](#)
[HealthDay en Español](#)
[Physician's Briefing](#)
[License Our News](#)

2

## Study Examines Latex Transfer to Food in Packaging

U.K. researchers say even small amounts can be deadly and urge stringent labeling changes

**Please note:** This article was published more than one year ago. The facts and conclusions presented may have since changed and may no longer be accurate. And "More information" links may no longer work. Questions about personal health should always be referred to a physician or other health care professional.

MONDAY, Aug. 7, 2006 (HealthDay News) -- Food packaging that contains latex should be labeled in order to prevent latex-sensitive people from being exposed to potentially deadly levels of the allergen, a group of experts said in response to a recent study.

The U.K. study found that a third of food packaging tested was contaminated with latex and that, in some cases, the latex was transferred to the food. One brand of chocolate biscuit contained 20 times the amount of latex that can cause a reaction. It's believed that as little as a billionth of a gram (1 ng/ml) can be enough to cause a reaction.

Researchers measured the presence of four major latex allergens in 21 types of food packaging for fruits and vegetables, meat, confectionary, pastry and dairy products. The highest latex levels were on ice-cream wrappers. One ice-cream wrapper had more than 370 ng/ml of latex, and the ice cream itself contained about 14 ng/ml.

One company told researchers that it sprayed entire wrappers with latex adhesive, so that the wrappers could be sealed with minimum wastage.

The study was published in the *Journal of the Science of Food and Agriculture*.

The findings are significant, experts from the U.K. Latex Allergy Support Group (LASG) Advisory Panel told the journal *Chemistry & Industry*.

"For a few people, natural rubber latex is a very potent allergen, and for these individuals, there is no safe level of exposure," LASG representative Graham Lowe said in a prepared statement. Latex transfer to food could account for some currently unexplained reactions, he noted.

### More information

The American Academy of Family Physicians has more about [latex allergy](#).

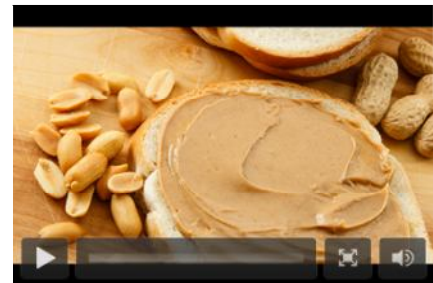
SOURCE: *Chemistry & Industry*, news release, Aug. 6, 2006

-- [Robert Preidt](#)

Last Updated: Aug 7, 2006

Copyright © 2006 [ScoutNews LLC](#). All rights reserved.

## HealthDay Video



Introducing peanuts during the first year of life may help prevent peanut allergy in high-risk children.

[» watch this video](#)

1000's of  
 Doctor  
 Approved  
 Allergy Relief  
 Products



Learn More

 National Allergy  
 For A Healthier You

### RELATED STORIES

- [In Northeast, Weather Changes May Mean More Ticks, Earlier](#)
- [Good Supermarkets in Poor Areas May Not Prompt Better Eating](#)
- [Additives in Processed Foods May Alter Gut Bacteria](#)
- [Exposing Babies to Peanuts May Help Curb Allergy Risk](#)
- [Could a Dishwasher Raise Your Child's Allergy, Asthma Risk?](#)
- [Americans Confused About Cancer Risks](#)

Testimony in Support of SB 911  
RELATING TO LATEX

COMMITTEE ON WAYS AND MEANS

Senator Jill N. Tokuda, Chair  
Senator Ronald D. Kouchi, Vice Chair

March 2, 2015

Thank you for the opportunity to present written testimony regarding SB 911 which would prohibit the use of latex gloves in dental health, health care facilities, ambulance or emergency medical services, and the food industry. My name is Cindy Hespe and I am a pharmacist who became severely allergic to natural rubber latex through exposure to latex gloves at work and through medical and dental procedures.

Banning the use of natural rubber latex gloves, utensils and other latex products in the health care and food industry will provide the following benefits:

- 1) allow individuals with a latex allergy to safely obtain health care;
- 2) assist individuals with a latex allergy to safely purchase food;
- 3) prevent unnecessary exposure to latex to individuals required to wear gloves in their work; and
- 4) prevent unaware patients and patrons from the inoculation and potential development of latex allergy.

A secondary outcome will be to decrease Workers' Compensation claims and potential law suits against restaurants and health care employers.

Statistics on latex allergy vary by resource because reporting of latex allergy to a central agency is not mandated, consistent or even encouraged. However, the Centers for Disease Control (CDC) and American Latex Allergy Association (ALAA) estimate that up to 6% of the general population, up to 17% of health care workers, 38% of dental workers, and up to 68% of people with Spina Bifida have latex allergy.(1,2) A study published in 2014 indicates that 11.4% of elderly have latex allergy.(3) There is also evidence that food industry workers' latex allergy rate is similar to health care workers.(4)

Because latex comes from a plant, there are over 60 different latex proteins. Currently diagnostic tests do not test for all the proteins; thus, the blood and skin tests are not reliable. Many people are indeed allergic, but because their family practice doctor or allergist does not understand the limitations of the available tests, the patient is told s/he is not allergic because the blood or skin test is negative. Clinical history should be the primary diagnostic tool if tests are negative, but many practitioners are not aware of this. These challenges in getting a diagnosis often delays care and the patient is further exposed to latex; their allergy may progress to anaphylaxis before getting a diagnosis.

People at risk of developing latex allergy include:

- Health care workers
- Food service employees
- Rubber industry workers
- Patients with "atopic" conditions such as asthma, eczema, hay fever
- Patients who have undergone multiple surgeries or medical procedures
- Workers in any environment with chronic latex exposure such as: restaurant/food industry, day care staff, hair salons, green house/agriculture workers, balloon and tattoo artists, security

personnel, painters/artists, military, emergency response (police, fire fighters, EMTs), mortuary/funeral home staff, construction workers

Latex allergy ranges from mild (rash, runny nose) to severe (anaphylaxis/death). There is no cure for a latex allergy. The only treatment is avoidance of latex.(5) Medication is used for managing anaphylaxis or allergy symptoms, but cannot prevent reactions. Latex allergy has been proven to be progressive with repeated exposure. The person with contact latex allergy can transition to full anaphylaxis with a single exposure. I know this to be true as it happened to me.

Latex allergy extends beyond latex gloves. According to the ALAA, there are over 40,000 consumer products that contain natural rubber latex. And the latex particles of many products become airborne which can lead to “occupational asthma.” Approximately half of sensitized hospital workers develop latex-induced asthma.(1)

Latex is often used in glues and adhesives. Deaths have been reported from glue used to apply hair extensions and I personally know two people who have had anaphylaxis to surgical glue. Anecdotal reports of reactions to food packaging commonly occur in the USA, but a report in the United Kingdom found 1/3 of food packaging contained natural rubber latex.(6)

Currently, the use of latex gloves is prohibited in food preparation in three states: Arizona, Oregon and Rhode Island. RI also mandates that all (non-food) businesses post warning if latex products are in use. Grass roots efforts are being organized to get legislation introduced in Connecticut and California.

One significant consideration in Rhode Island’s law was the reduction of Workers’ Comp claims. According to allergist Anthony Ricci, MD, in a communication with the American Latex Allergy Association:

“... I was instrumental in convincing the administrators and medical directors of our community hospital (Kent Hospital) to clean the entire hospital and make it the only latex-safe hospital in Rhode Island. Our workers compensation cases went from approximately 80 prior to the change to zero since. This has resulted in significant cost savings. Many nurses and other health care professionals with latex allergy have returned to work at Kent Hospital...”

While once more expensive, today latex-free gloves, utensils and products are no longer more expensive than latex products and are frequently less expensive to purchase.

While use of latex gloves and balloons in health care environments has declined (but unfortunately not eliminated), the use in other environments has increased. Today everyone has access to disposable latex gloves and the vast majority of users have no idea that latex gloves put them at risk of developing a life-changing, irreversible allergy. These gloves are used by plumbers, hair stylists, restaurant workers, tattoo artists, house cleaners, day care staff, travel industry staff, police/fire /military staff, and more. Latex balloons provide cheap decoration for parties, fundraisers, charity events, and celebrations. This extensive use in many professions and environments is causing the next wave of new – and often preventable—patient groups with latex allergy.

### **MY PERSONAL STORY:**

I graduated from pharmacy school in 1981 right as the AIDS frenzy began. I obtained latex allergy by wearing powdered latex gloves as a hospital pharmacist and also through exposure as a patient treated by dentists and physicians wearing latex gloves. With the risk factors of eczema and seasonal allergies, the

exposure to natural rubber latex gloves and medical/dental products caused my latex allergy. Repeated exposures worsened it to the point of life-threatening anaphylaxis.

By 1983, my hands were chapped, red, itchy and oozing. We knew nothing about latex allergy at this time; I wrongfully assumed the heat of wearing gloves many hours during my shift caused the irritation. After being stuck on night shift for almost 5 years, I made a career shift and went to work for a pharmacy association. Today I know that my job change saved my life: I would have been anaphylactic in no time and since very little was known about latex allergy back then I could have easily died.

In the early 90s, I went back to work as a hospital pharmacist. By then, pharmacy technicians were making most of the IVs and TPNs, so I only wore gloves briefly during my shift. However, I soon developed symptoms of food allergies that we now know are associated with latex allergy. Neither my internal medicine doctor nor my dentist could explain these symptoms – what we is now known as “latex-fruit syndrome” – whenever I ate fresh tomato, strawberries, or green pepper.

In 2003 following my second c-section (and more medical exposure to latex), I worsened – as this allergy is known to do – from a mild, contact latex allergy to full anaphylaxis from 2 bites of a restaurant meal that was prepared with latex gloves. I have had 3 episodes of life-threatening anaphylaxis from eating restaurant food prepared with latex gloves in spite of drilling staff about latex use by the chefs. The last episode happened on our anniversary after being assured and reassured that no latex gloves were used by the restaurant. The next day after I recovered from a nasty reaction, I called the restaurant and the manager admitted that latex gloves were indeed used in chopping vegetables in the prep kitchen, just not in the final plating of my meal. They thought they could make a safe meal by not touching my final food with latex gloves. This is a common misperception by chefs: they think they can prepare a safe meal, but their entire kitchen is contaminated with latex particles or the plates were washed using latex gloves. This transfer of latex proteins from gloves to food has been documented in the literature (Beezhold, et al) and there is no clinical reason for food handlers to wear latex gloves.

People with latex allergy have to research all pre-packaged foods to see if latex gloves, conveyor belts, or latex-based adhesive seals or packaging might contaminate our food. We search for produce without latex rubber bands and we cut off (rather than peel off) produce stickers in fear of a latex-based adhesive. I have had two episodes of life-threatening anaphylaxis from a meal using 2 different brands of pre-packaged ground turkey (cooked at home) and another occasion using jarred, pre-chopped garlic. I later verified with the manufacturers that latex gloves were used in processing of the turkey and garlic.

I am unable to dine at over half the restaurants in my community due to latex use at area restaurants. I am unable to purchase produce at our local farmers’ market due to latex glove use and balloons. I could not attend my state professional conference recently for continuing education due to latex use (food prep and room cleaning) at the hotel. My family plans vacations around states that are latex-safe for me: usually Arizona or Oregon. I honeymooned and vacationed five times in your beautiful state of Hawaii prior to my latex allergy – it is my favorite vacation destination. We would love to be able to bring our children to Hawaii and add Hawaii to our latex-safe vacation list.

In 2009 while living in Idaho, my allergy progressed further to reacting to airborne latex. I was working as a consultant pharmacist to skilled nursing facilities and handled charts that nurses touched with latex gloves. I developed “occupational asthma” where I react to latex particles in the air. I now develop asthma symptoms and hives when I step into a room with latex gloves or balloons. I now must wear a mask to attend my son’s soccer games that are played on recycled tire artificial turfs. After being flat-out rejected by one employer because of my latex allergy (and in violation of ADA), I was fortunate to find work in Idaho at a latex-safe psychiatric hospital where all gloves were latex-free and no balloons were allowed. My supervisor bought latex-free fatigue mats, rubber bands, keyboards, mouse pads, and office

supplies to accommodate me. The costs were minimal, they avoided Workers' Comp claims, and he was happy to learn more about latex allergy to better care for our many latex-allergic patients. Since we moved to California in 2013, sadly, I have not been able to find latex-safe employment.

Since my allergy progressed to occupational asthma and anaphylaxis, I have also struggled to obtain latex-safe health care. Most health care professionals do not understand latex allergy – not even some allergists. Doctors, nurses, pharmacists, and other health care professionals learn very little about latex allergy in their training. Many feel that as long as they have latex-free gloves and medical supplies available, they can provide safe care. But this is not true: latex particles are in the air and remain on their bodies after they remove latex gloves. Most health care workers are not aware of latex content in medicine, medical supplies and therapy equipment. While the FDA mandates that manufacturers label medical supplies with a warning about latex content, there is no requirement for medications. As such, many health care professionals – even many pharmacists – are unaware that medications could contain latex particles from processing equipment or the corks in the injectable medication vials.

I cannot be safely treated in any clinic, hospital, pharmacy, or ancillary care facility that uses latex gloves or allows latex balloons. Another problem is the lack of awareness of what products contain latex. Here are examples where my care was compromised or I was unable to access care:

- I was unable for 2 years to find a primary care practitioner or gynecologist for that did not use latex gloves. I finally found a primary care doctor who did not wear latex gloves, but she could not do a complete exam because her stethoscope and blood pressure monitor had latex components.
- During carpal tunnel surgery, I was not able to have a steroid injection to minimize post-op swelling because all hospital steroid products had latex corks in the injectable vials.
- I had a surgery scheduled in December 2013 to rule out cancer. While I was proactive in educating my surgeon (who didn't wear latex gloves, but admitted she knew very little about latex allergy) and the hospital staff about the severity of my allergy and communicated steps needed to ensure my safe care (ie, first case of the day after the OR suite was cleaned thoroughly since they still use latex gloves in the OR, latex-free medications may need to be ordered, latex-free anesthesia equipment, etc), my surgery was cancelled at the last minute because the anesthesiologist felt he was unable to safely care for me. I was not happy, but he clearly saved my life. The hospital OR nurse supervisor told me they had IV bags with latex ports (something I have not seen in years), the pharmacy could not tell the surgeon or anesthesiologist what medications had latex, and so forth. She promised to find a safe place for my surgery in a sister hospital, but after one month of waiting with no plan in place, I gave up and transferred to a university teaching hospital in a nearby town. My care was delayed over 3 months, so fortunately I did not have cancer.
- I currently live in a metropolitan area with 3 major health-system hospitals. I have learned that two are not latex-safe: one is the hospital I described above and the other still uses latex gloves for general patient care. The third is a major university teaching hospital that allows latex gloves in the operating room, but not in the rest of the hospital. I can only have surgery if I am the first patient of the day as that is the only time the OR would be clean and free of latex particles. They have no plan in place for emergency surgeries for patients like me.
- During a pre-surgery EKG, radiology staff was unable to tell me if EKG leads were latex-free. I had to show him where to look on the packaging.
- During routine blood tests, the laboratory worker was unable to tell me if band-aids and tapes were latex-free. They buy these products in bulk and the outside package which would be labeled re: latex content (by FDA mandate for "medical supplies") had been discarded.
- After being assured by appointment staff that a local pediatrician's office did not use latex gloves, I took my son to an appointment to find latex gloves in every exam room.

- An office nurse attempted to administer a vaccine from a vial with a natural rubber latex cork – arguing that “everything is latex-free these days” when in fact it is not.
- Balloons at a retail pharmacy to promote a vaccination clinic required that I leave without my antibiotic prescription.
- A nurse wanted to use a latex-based ACE wrap on my knee and rolled her eyes and argued “It is just an ACE wrap” when I refused it.
- I was unable to get physical therapy for a knee injury due to latex use at all area PT clinics.
- I pay cash for “out-of-network” care (per my insurance) for my son who needs occupational therapy because all “in-network” occupational therapists use latex supplies. I could not safely participate in his care at the in-network providers and he has several risk factors for latex allergy.
- A dental hygienist wore latex gloves as she began to clean my teeth even though my chart is clearly marked. I fortunately smelled the latex before she touched the inside of my mouth. On another occasion, I developed hives from latex balloons in another examination room at my dentist’s office.
- While living in Idaho from 2002-2013, I was only able to find one latex-safe dental provider. She, however, was not a good dentist. I am now paying cash to have all her work redone.

## **SUMMARY**

I would like to stress that we humans cause latex allergy. Having risk factors and being exposed to latex products cause latex allergy. We knew by the late 1990s what causes latex allergy, yet here in 2015 we continue to expose workers and patients and customers to latex unnecessarily. Health care students are not being educated. In fact, one young nursing student I know is currently being provided with powdered latex gloves (the worst!) to wear in her clinical settings. She has been told she does not have to be accommodated for her allergy because she is a student, not an employee.

I belong to a latex allergy support group and we get at least one new member every single day: health care workers, hair stylists and tattoo artists, food service employees, day care workers, military, and even parents of preschoolers to teens with latex allergy. Even though latex allergy falls under the Americans with Disabilities Act, these people struggle to find latex-free food, latex-safe medical and dental care, latex-safe schools for the children, latex-free clothing, and latex-safe work environments. I personally know several people who are 100% disabled from latex allergy including a couple who can only leave their homes if they wear respirators.

As a health care professional, I would like to suggest that you include an education component to your bill that requires mandatory latex allergy education for all health care workers. Employees that work in environments that do not use latex gloves, often assume that “everything is latex free” but with 40,000 products, that is not possible. If you eliminate latex gloves, I can be safely treated; however, the employees need to be aware that latex is also in products such as surgical glue, ACE wraps, medications, disposable absorbent pads (Chux), grips on pens, and much more.

Some groups may oppose this legislation by stating that low-protein powder-free gloves are safe. It may be true that low-protein gloves are less likely to cause latex allergy than the gloves I wore in the 1980s and 90s. However, please know that low-protein gloves are absolutely NOT safe for someone like me who is already sensitized to latex.

Praying that SB 911 becomes law, I ask that you make the penalty for violating commensurate with the consequence to the victims. Should a chef prepare my food or a dental hygienist clean my teeth with latex gloves, I am guaranteed anaphylaxis and will use at least one EpiPen (\$300) and incur the expenses

of an emergency room visit (\$\$\$\$). Additionally, with each reaction, I become more reactive and will have life-long effects from their negligence.

SB 911 would address several major challenges for people with latex allergy: finding safe health care, dental care, emergency services, and food services. I applaud this effort and admire Hawaii for stepping up to address this extremely challenging disability.

Please support the proposed SB 911 to prohibit the use of natural rubber latex from use dental health care, health care facilities, ambulance services or emergency medical services, and food establishments.

Cynthia Hespe, RPh, FCSHP  
5610 Marden Drive  
Davis CA 95618  
530/564-4647

*References:*

- 1) <http://www.cdc.gov/healthcommunication/ToolsTemplates/EntertainmentEd/Tips/LatexAllergy.html>
- 2) American Latex Association [www.latexallergyresources.org](http://www.latexallergyresources.org)
- 3) <http://www.immunityageing.com/content/11/1/7>
- 4) Journal of Food Protection, Vol 71, No. 11, 2008 Page 2336, Latex Glove Use by Food Handlers: The Case for Non-latex Gloves
- 5) <http://acaai.org/allergies/types/skin-allergies/latex-allergy>
- 6) <http://www.foodproductiondaily.com/Safety-Regulation/Latex-used-in-one-third-of-food-packaging-study-finds>

*State regulation/law references:*

RI: <http://law.justia.com/codes/rhode-island/2013/title-23/chapter-23-73>

AZ: see slide 24

<http://www.azdhs.gov/phs/oeh/fses/pdf/az-food-safety-food-code-requirements.pdf>

OR: see 3-304.15(E) <http://public.health.oregon.gov/HealthyEnvironments/FoodSafety/Documents/foodsantiationrulesweb.pdf>

Connecticut:

<http://www.cga.ct.gov/2015/TOB/H/2015HB-05347-R00-HB.htm>

*Resources:*

American Latex Allergy Association [www.latexallergyresources.org](http://www.latexallergyresources.org)

American Academy of Allergy Asthma & Immunology [www.aaaai.org](http://www.aaaai.org)

American College of Asthma, Allergy and Immunology [www.acaai.org](http://www.acaai.org)

OSHA [www.osha.gov/SLTC/latexallergy/index.html](http://www.osha.gov/SLTC/latexallergy/index.html)

CDC/NIOSH Alert: Preventing Latex Allergic Reactions to Natural Rubber Latex in the Workplace



**wam3 - Nicolas**

---

**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Saturday, February 28, 2015 3:57 PM  
**To:** WAM Testimony  
**Cc:** anthony\_orozco@yahoo.com  
**Subject:** \*Submitted testimony for SB911 on Mar 3, 2015 09:05AM\*

**SB911**

Submitted on: 2/28/2015

Testimony for WAM on Mar 3, 2015 09:05AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Anthony Orozco	Individual	Oppose	No

Comments:

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Do not reply to this email. This inbox is not monitored. For assistance please email [webmaster@capitol.hawaii.gov](mailto:webmaster@capitol.hawaii.gov)